## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

07/16/2007

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block | for any change of address)

HOFFMAN WARNICK & D'ALESSANDRO, LLC

FILING DATE

7590

Typed or printed name Michael F. Hoffman

PTOL-85 (Rev. 07/07) Approved for use through 07/31/2007.

23550

75 STATE STREET 14TH FLOOR ALBANY, NY 12207

APPLICATION NO.

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

> Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being faesimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

> > ATTORNEY DOCKET NO.

Registration No. \_ 40,019

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

(Depositor's mano) (Signa (Date)

CONFIRMATION NO.

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be made unliked to the course correspondence correspondence including the Patent, advance orders and notification of maintenance fees will be made to the course correspondence address, and/or (b) tudicating a capacite "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

FIRST NAMED INVENTOR

10/800,588	03/15/2004		Thomas West		NORA-0001	1649
TITLE OF INVENTION	N: BOX FLAP LOCKING	S SYSTEM				•
	•					
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV, PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	. \$300	S0	\$1700 .	10/16/2007
EXAMINER .		ART UNIT	CLASS-SUBCLASS			
· ELKINS, GARY E		· 3782	229-109000			
1. Change of correspondence address or indication of "Fce Address" (37			2. For printing on the patent front page, list			
CFR 1,363).  Change of correspondence address (or Change of Correspond			(1) the names of up to 3 registered patent anomelys			
☐ Change of correspondence address (or Change of Corresp Address form PTO/SB/122) attached.					era 2 Hoffman,	Warnick &
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or seguent) and the names of up to 2 registered patent attorneys or agents. If no name is 18ted, no name will be printed.			
		TO DE DRINTED ON	THE PATENT (print or type	m) .		
3. ASSIGNEE NAME A	IND RESIDENCE DATA	God bolow, no accionan	dote will appear on the p	atont If an assignor is in	lentified below, the doc	ment has been filed for
recordation as set for	th in 37 CFR 3.11. Comp	oletion of this form is NO	data will appear on the pa T a substitute for filing an	assignment.		
(A) NAME OF ASSI			(B) RESIDENCE; (CITY and STATE OR COUNTRY)			
Norampac Schenectady, Inc			Schenectady, NY			
Please check the appropr	riate assignce category or	categories (will not be p	inted on the patent) ;	Individual 🖾 Corporati	on or other private group	entity Government
4s. The following fcc(s)	are submitted:	41	o. Payment of Fee(s): (Plea	se first reapply any prev	iously paid issue fee sh	own above)
⊠ Issue Fee			☐ A check is enclosed.			
Publication Fee (No small entity discount permitted)			Payment by credit card.			
Advance Order -	# of Copies		The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 500999 (enclose an extra copy of this form).			
5. Change in Entity Sta	tus (from status indicate	d above)				
a. Applicant claim	ns SMALL ENTITY state	is. Sec 37 CFR 1.27.	b. Applicant is no long			
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fee (if req records of the United Sta	uired) will not be accepte tes Patent and Trademark	d from anyone other than to Office.	he applicant; a registered	attorney or agent; or the	assignce or other party in
Authorized Signature	14 A O . C	1460-		-	t 27, 2007	

This collection of information is required by 37 CFR 1,311. The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1,14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the properties of the completed application form to the USFTO. Time will vary depending upon to officiar U.S. Paperties of Commerce, P.O. Box 1450, Alexandria, Virginia 2231-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 2231-1450.

OMB 0651-0033

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.